

MAR 27 2012

INYO CO. CLERK  
KAMMI FOOTE, CLERK



COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) Pucci (FIRST) Robert (MIDDLE) F DEPUTY

1. Office, Agency, or Court

Agency Name

INYO COUNTY

Division, Board, Department, District, if applicable

BOARD of SUPERVISORS

Your Position

3<sup>rd</sup> DISTRICT SUPERVISOR

► If filing for multiple positions, list below or on an attachment.

Agency: INDIAN GAMING LOCAL Benefit Committee Position: MEMBER

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☒ County of INYO

☐ City of \_\_\_\_\_

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. [Redacted Signature Area]

I certify under penalty of perjury under the laws of the State of California that

Date Signed 2-8-12 (month, day, year)

Signature [Redacted Signature]

**SCHEDULE D**  
**Income – Gifts**

Name

Rick Pucci

► NAME OF SOURCE

CHEVRON ENERGY SOLUTIONS CO.  
ADDRESS (Business Address Acceptable)

23 NEVADA IRVINE CA 92606

BUSINESS ACTIVITY, IF ANY, OF SOURCE

CONSULTANT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/1/2011</u>	<u>\$297.30</u>	<u>MYSELF + WIFE 2 DINNERS + TRANSPORT</u>

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/11</u>	<u>\$</u>	

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/11</u>	<u>\$</u>	

► NAME OF SOURCE

18<sup>TH</sup> AGRICULTURAL DISTRICT (STATE FAIR) CA  
ADDRESS (Business Address Acceptable)

P.O. BOX 608 BISHOP, CA 93515

BUSINESS ACTIVITY, IF ANY, OF SOURCE

COUNTY FAIR (INYO IS A PARTICIPANT)

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/1/11</u>	<u>\$30.00</u>	<u>1-5 DAY FAIR PASS</u>

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/1/11</u>	<u>\$30.00</u>	<u>1-5 DAY FAIR PASS</u>

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/11</u>	<u>\$</u>	<u>TOTAL 2 FAIR PASSES</u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/11</u>	<u>\$</u>	

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/11</u>	<u>\$</u>	

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/11</u>	<u>\$</u>	

Comments: